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**CERTIFICATE OF FACSIMILE TRANSMISSION
UNDER 37 CFR §1.8**


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Date: December 13, 2005
Brooke FrenchIn re application of: **Jordan**Confirmation No.: **5128**U.S. Serial Number: **10/098,698**Art Unit: **2686**Filing Date: **March 15, 2002**Examiner: **Daniel J., Willie J.**Our Reference Number: **190252-1850**Title: **Local Point of Presence**

Resubmission of RCE
Copy of documents filed September 7, 2005
Copy of Return Receipt Postcard stamped by PTO

Total Pages Transmitted (including cover sheet) – 23**Customer Number - 38823**

DEC 13 2005

AMENDMENT TRANSMITTAL LETTER (LARGE)				Docket No. 190252-1850	
Applicant(s): Jordan					
Serial No. 10/098,698	Filing Date March 15, 2002	Examiner Daniel Jr., Willie J.	Confirmation No. 5128	Group Art Unit 2686	
Invention: Local Point of Presence					
Commissioner for Patents Mail Stop RCE P.O. Box 1450 Alexandria VA 22313-1450					
Transmitted herewith is an Amendment and Response to Office Action and a RCE in the above-identified application.					
The fee has been calculated and is transmitted as shown below					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	23 -	23 =	0	X \$50.00	\$0
INDEP. CLAIMS	4 -	4 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$120.00	2 ND MONTH <input checked="" type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$0
Other Fees: Extension of Time Fee (2 Months \$450.00) RCE Fee (\$790.00)					\$1,240.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$1,240.00
<input type="checkbox"/> No additional fee is required. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed. <input checked="" type="checkbox"/> A Credit Card Payment Form PTO-2038 is attached in the amount of \$1,240.00. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.					
 _____ Jeffrey R. Kuester, Reg. No. 34,367			9.7.05 _____ Date		

DEC 13 2005

PTO/SB/17 (12-04)

Approved for use through 07/31/2005 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004

Fees Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005**Complete if Known**

Application Number	10/098,698
Filing Date	March 15, 2002
First Named Inventor	Jordan
Examiner Name	Daniel Jr., Willie J.
Art Unit	2686
Attorney Docket No.	190225-1850

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$11,240.00)**☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):☐ Deposit Account Deposit Account Number: 2U-0778 Deposit Account Name: Thomas, Kayden, Horstemeyer Risley, L.L.P.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	Filing Fees		Search Fees		Examination Fees		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESSIVE CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent
 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent
 Multiple dependent claims

Multiple dependent claims				Multiple Dependent Claims		
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
23	-20 or HP =	0	50	0	360	0
HP = highest number of total claims paid for, if great than 20						
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
4	-3 or HP =	0	200	0		
HP = highest number of total claims paid for, if great than 20						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)
 for each additional 50 sheets or fraction thereof. See 35 USC 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =		(round up to a whole number) x	x	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
 Other: RCE (\$790.00); 2 Months EOT (\$450.00)

\$1,240.00

Complete (if applicable)

SUBMITTED BY	Registration No. 34,367	Telephone Number	770-933-9500
Typed or Printed Name	Jeffrey R. Kuester	Date	9-7-05
Signature			

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) and application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send to Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

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CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

Mail Stop RCE
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Alexandria, Virginia 22313-1450

on

9.7.05

Jeffrey R. Kuester

In Re Application of:

Jordan

Serial No.: 10/098,698

Filed: March 15, 2002

Confirmation No.: 5128

Group Art Unit: 2686

Examiner: Daniel Jr., Willie J.

Docket No.: 190252-1850

For: **Local Point of Presence**

The following is a list of documents enclosed:

Return Postcard
Amendment Transmittal Page
RCE Transmittal Page
Fee Transmittal
Extension of Time (2 Months)
Credit Card Authorization in the amount of \$1240.00 for RCE Fee and
Extension of Time Fee
Amendment and Response to Office Action

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Customer No.: **38823**